

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILED DATE

APPLICANT(S)

10/7/3-254

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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TOTAL NO.	3		3			
TOTAL DEP.	25		13			
TOTAL CLAIMS						

	IND		DEP		IND		DEP		IND		DEP	
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